



## Childhood Lead Poisoning Prevention Program Is Addressing Challenges

New directives from the Centers for Disease Control and Prevention (CDC) require fundamental changes in Indiana's Childhood Lead Poisoning Prevention Program. Meeting these directives can be perplexing when so much must be done, according to Nancy Cobb, CLPPP's new director.

"What is needed is everything at once," Cobb said in a recent interview.

She would like to put a variety of measures into play to stop childhood lead poisoning as soon as possible, because—unlike many childhood illnesses—the effects of lead poisoning are cumulative, largely irreversible, and most likely to occur in developing children.

Cobb said that lead causes brain damage in children with resultant learning disabilities and accompanying behavioral problems. Such problems not only affect the lead-poisoned child but also the social environment in which a lead-poisoned child interacts.

Lead poisoning increases the probability a child will develop attention deficit disorder and act out disruptively in

learning settings. One unruly child, Cobb said, can disrupt the learning of all the children in a classroom.

Lead-poisoned children are more likely to become juvenile and youth offenders who burden the criminal justice system and become drains upon community resources.

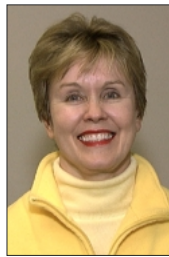
But the root problem is not easily dealt with, according to Cobb.

Typically, those children most affected live in houses built before 1950, when the use of interior and exterior lead-based paint was the rule. Lead gradually was phased out as a component in residential paint. By 1978, lead-based paint was banned.

Lead poisoning can even begin to affect humans prenatally, according to Cobb. Environmental lead enters a pregnant woman's bloodstream, crosses the placenta, and is shared with the growing fetus.

"Pregnant women need to be educated and protected from lead paint," Cobb said.

Very young children are more likely to ingest lead because



NANCY COBB  
Photo by Daniel Axler

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## State Health Commissioner Seeks Dialog at Community Forums To Attack Chronic Disease

Chronic disease is the leading killer of Hoosiers.

State health records show that chronic diseases were the cause of more than 75 percent of the 55,209 deaths in Indiana in 2000. Cardiovascular diseases, cancer, and diabetes accounted for more than 65 percent of the total deaths.

State Health Commissioner Gregory Wilson, M.D. has scheduled a round of Public Health Community Forums around the state to assess the public health needs of local communities.

"Our ultimate goal is to improve the health of Hoosiers, focusing on obesity, diabetes, cancer, and cardiovascular disease, including stroke," Dr. Wilson said.

The forums are designed to provide input from community, health, business, government, and academic leaders to determine what facilitates and impedes solving the chronic disease problems in local communities. Forums scheduled to be held throughout Indiana for October and November can be found at the ISDH Web site: <http://www.IN.gov/isdh>, and then by clicking on News Releases at the bottom of the page and then on the October 7, 2002 release.

The latest United Health Foundation Report, which ranks best as 1 and worst as 50, currently ranks Indiana: 39th in total mortality, 47th in prevalence of smoking, 35th in heart

disease, 30th in cancer deaths, and 30th in premature death. In studies of lung cancer, Indiana is the 9th highest in the country.

"Chronic diseases have a dramatic effect on Indiana's economy, and taxpayers bear much of the cost burden," Dr. Wilson said. "Diabetes is a major health problem, affecting over 360,000 Hoosiers and costing several billion dollars each year."

The State Department of Health has formed a Chronic Disease Advisory Council, which comprises the medical directors of all the major health insurers, academic experts, non-profit organizations, minority groups, consumers, employers, and representatives of health care provider groups.

The first initiative of this Council was to develop evidence-based, consensus clinical guidelines for the management of diabetes. More than 100,000 brochures on the management of diabetes have been distributed to individuals with this condition.

The State Department of Health has also formed a statewide Cancer Consortium with the Indiana University Cancer Center and the American Cancer Society. The Consortium, which has more than 60 members, is working to develop a state cancer plan and implement intervention strategies.

# National Alzheimer's Disease Awareness Month To Be Observed With November Conference

November is National Alzheimer's Disease Awareness Month. In observance, the Alzheimer's Association of Central Indiana is holding its 9th Annual Indiana Conference on Alzheimer's Disease on November 21 at the Indianapolis Downtown Marriott.



The challenge of caring for persons with Alzheimer's disease can bring out the best and sometimes less than the best in caregivers. This year's conference is devoted to providing philosophy, ideas, and techniques to help make the work of caregivers less stressful, more productive and happier for both Alzheimer's patients and caregivers.

The Indiana State Department of Health and its Indiana State Office of Rural Health are sponsors, together with the Indiana Health Care Association, American Senior Communities, and an array of nursing home service providers.

State Health Commissioner Greg Wilson, M.D. is slated to open the conference with welcoming remarks.

"The Best Friends Staff: A New Look at Building a Dementia Capable Staff," is the topic of the keynote address that is billed as a groundbreaking approach to Alzheimer's care.

Included among the 14 breakout sessions are some of the following topics:

- reinvigorating staff training,
- marketing special care units,
- discussing approaches for making friends of resident family members,
- working with nursing assistants to help improve communication with Alzheimer's patients,
- learning to read behavioral signs and symptoms supporting positive staff action, rather than reaction,
- resolving problems of moving a patient between units,
- creating and sustaining dynamic interactive-care teams,
- accurately assessing depression and dementia symptoms and discussing treatment options, and
- understanding level II triggers for Preadmission Screening and Resident Review (PASRR) and level II program requirements and benefits to the client.

For registration and information: (317) 575-9620, 1-888-575-9624 or fax: (317) 582-0669. Please register by November 11. Application for 4.75 CEU credits has been made for Social Workers and Health Facility Administrators.

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they have a tendency to put hands and almost anything in their mouths.

However, most of the danger from lead paint is not obvious because the symptoms and mimic other conditions.

"The largest source of lead poisoning is lead dust," Cobb said. She said that microscopic dust is created by raising and lowering windows that pulverize chipping and peeling paint.

"The dust, circulated by drafts around windows, can be on the floor, on the furniture, and on toys," she said. The dust can enter the blood stream through the mouth, lungs, and skin.

"What ISDH's lead program must do," Cobb said, "is raise awareness among parents, childcare providers, and head start programs—but most of all among physicians."

Once aware, members of these groups must see that at-risk children are screened for elevated blood-lead levels.

She said that where the levels are elevated, environmental testing must be done to determine the source and, once discovered, remediation efforts begun.

"It is CLPPP's job to see that remediation is carried out and that children who have been verified to have high blood-lead levels are monitored, and that the blood-lead levels fall so that no further damage is done," Cobb said.

She said that the level of blood lead considered to be problematical is now half of what it was ten years ago when 20 mi-

crograms per deciliter was considered elevated.

"Committees in the federal government are now discussing the desirability of federal laws requiring remedial action whenever any level of blood lead is detected," Cobb said.

Midwestern housing units with lead hazards, as determined by CDC supported research, composes approximately 33 percent of the housing stock.

Cobb said that if lead is to be eliminated as a health risk by 2010, as the CDC's Healthy People 2010 goal proposes, then the goal is to make older housing safe as quickly as possible.

"Having the resources to deal with the housing issue is an enormous challenge," Cobb said. "What we're trying to do is to develop partnerships with local entities and point them in directions where testing and remediation resources may be found."

"There are nine coalitions across the state looking for resources, which CLPPP is helping them explore," she said. The coalitions are composed of parents, housing officials, department of health professionals, educators, and head start program administrators.

Cobb added, "There's no big pot of money. I keep my eyes open for all possible grant opportunities."

# Renee Miller is New Operational Services Assistant Commissioner

Renee Miller, ISDH's new Operational Services assistant commissioner, comes well versed in Indiana State Department of Health budgetary matters.

That's because in her previous position, she served as the Indiana State Budget Agency analyst overseeing the Department of Health's budget. Miller had worked in the Budget Agency for five years.

Previous to that, she also acquired government experience in the Indiana Department of Transportation (INDOT) and the Indiana Housing Finance Authority, a quasi-governmental agency.

At INDOT, she was a project manager in the Public Transit Department.

Miller said her interest in public health work dates back to her graduate studies at the I.U. Northwest campus, with a particular reference to a health economics course that peaked her interest in health care.



**RENEE MILLER**

*Photo by Daniel Axler*

Terre Haute when he obtained a school administrative position there.

Her husband, Glenn Miller, is now principal of the Guion Creek Middle School in Marion County's Pike Township. She said he has been subject to good-natured ribbing over the years due to his name being the same as the orchestra leader.

Miller and her husband are raising

She said she had planned to stay in the Chicago area for a residency at Mt. Sinai Hospital in conjunction with her master's degree, but supported her husband's career move to

three children, Glenn, Jr. (age 13), John (age 6) and Amy (age 2). Commitment to job and family leaves little time for other pursuits. However, Miller said the family does make occasional trips to see college football at Ann Arbor on visits with her younger brother. Her brother is assistant football coach at the University of Michigan, where he has had a hand in coaching a Heisman Trophy winner.

Miller said she is a native Hoosier, born in Indianapolis. Following her graduation from Howard University where she obtained a split economics/finance major, she said she enjoyed life living (and shopping) in New York City while working in the public finance section of First Boston Bank's investment banking division.

Miller then returned to Indiana to complete work on a master's degree in public administration at I.U. Northwest.

# Food Protection Program Examines Ground Beef Irradiation Safety Issues

Scott Gilliam, ISDH Food Safety manager, spoke at an October 2002 conference held at the Indiana State Fairgrounds on the safety of irradiation. Representatives of the Minnesota Beef Council also presented information on the process to an audience comprising members of the Indiana Beef Council.

Gilliam started looking at the pros and cons of irradiating ground beef in the fall of 2001 at a Central Region Seminar conducted by the FDA. One of the seminar's topics included a presentation by the Minnesota Beef Council on the effects of irradiating ground beef to kill bacteria (like E. coli), viruses, and protozoa, to make it safe for consumers.

What impressed Gilliam was that ir-



**SCOTT GILLIAM** (first row, right), Food Protection Program, appears with representatives of the Indiana and Minnesota beef councils at irradiation seminar.

radiating ground beef does a thorough job killing pathogens—up to 99.99 percent he says.

The implications of using irradiation, he says, is that recent massive recalls of ground beef would never have happened had the beef been sanitized through irradiation.

Gilliam says that after a careful review of the evidence, ISDH views the use of appropriately applied irradiation as a safe and acceptable process for assuring the safety of ground beef for human consumption. For the foreseeable future, he believes that consumers will have a choice of either irradiated or non-irradiated ground beef. He said all irradiated packaged meat products are required to be identi-

fied with appropriate labels.

Gilliam says that two sources are currently used to irradiate ground beef.

"One uses cobalt-60, a radioactive material. This process is being used in Florida," he said. "The other method applies irradiation through the use of a linear accelerator."

Both apply irradiation after the beef is sealed and packaged, which prevents recontamination by external pathogens.

In Indiana, irradiated ground beef is now available from Schwan's Foods, and in December 2002, it will be widely available from Kroger foodmarkets.

Gilliam says that restaurant chains have shown interest in the process due to irradiation's ability to reduce liability.

Gilliam says he personally likes the process because it's now possible to cook beef patties the way he likes them, medium rare, to preserve the tenderness and flavor of the beef without having to worry about it being unsafe.



# National Public Health Information Coalition Honors ISDH for Bioterrorism Internet Web Pages



The National Public Health Information Coalition (NPHIC) on October 9 named the Indiana State Department of Health as a 2002 Silver Award winner for its "Bioterrorism: Questions and Answers" Web site.

ISDH published and continually updated this site in the days, weeks, and months following the September 11th attacks, to inform the public about anthrax and other potential bioterrorist threats.

This award is for "Excellence in

Public Health Communication" in internet home pages that are produced in-house (vs. externally).

Margaret Joseph accepted the award on behalf of ISDH at the NPHIC annual conference in Charleston, SC.

NPHIC is the national organization of public information officers at state and local health departments; it is affiliated with the

Centers for Disease Control and Prevention (CDC).

The staff who created this site and kept it updated were: Richard Dillman, ISDH Webmaster; Margaret Joseph and Jennifer Dunlap, Public Affairs; and James Howell and Bob Teclaw, Epidemiology.

The NPHIC was developed under the guidance of the Centers for Disease Control and Prevention in 1990, when the organization's first annual national conference was held.

An underlying principle of the organization is that programs developed to reduce risk of disease and death need to be communicated to the public to be effective.

Broad implementation of these programs cannot take place unless the public is both educated about risk reduction and subsequently decides to adopt healthier behaviors, according to the organization's historical documentation. NPHIC is also affiliated with the Association of State and Territorial Health Officials (ASTHO).

## Laker Receives Health Commissioner Award



**STATE HEALTH COMMISSIONER GREG WILSON, M.D.** (left) presents Mark Laker with the State Health Commissioner Award at a reception held for Laker on October 18. Laker has been director of the Office of Rural Health and a health educator in the ISDH Local Liaison Office, where he promoted wellness and specialized in health issues affecting seniors. He is leaving ISDH after 28 years of service to assume new duties as assistant director of the Bureau of Aging and In-home Services in the Division of Disability, Aging and Rehabilitation Services, Indiana Family and Social Services Administration. *Photo by Daniel Axler*

## Glaspie Coordinates ISDH Team for 'Making Strides Against Breast/Cervical Cancer' Walk

Clara Glaspie and other ISDH team members participated in the benefit walk, *Making Strides Together Against Breast and Cervical Cancer*, on October 20.

Glaspie, who coordinated this year's staff effort, works in the Breast and Cervical Cancer Prevention Program as a field staff person who helps support activities directed toward getting eligible at-risk women screened for breast cancer. Her coordination of the walk is a natural outgrowth of her vocational commitment.

Glaspie works at ISDH and the American Cancer Society.

Time in the office is divided between the ISDH 2 North Meridian Street address and the Cancer Society's offices on 62nd Street.



**CLARA GLASPIE**, ISDH Breast and Cervical Cancer Program (inset), participated with other ISDH employees at *Making Strides Together Against Breast and Cervical Cancer* walk on October 20.

*Walk photo by Kelly Turner / Inset photo by Daniel Axler*

## Indiana State Department of Health **Express**

The *Indiana State Department of Health Express* is a bi-weekly publication for ISDH employees and stakeholders. To submit news items, call (317) 233-7336 or send information to: ISDH Express, Office of Public Affairs, 2 N. Meridian St., Section 2E, Indianapolis, IN 46204-3003. Inquiries should be directed to:

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